BEST AVAILABLE COPY Application of Docket Number												ber
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001 O O 3 3 2 3 0												
		SM/ TYP	ALL EI	YTITY	OR	OTHER SMALL						
TOTAL CLAIMS			42				A	RATE FEE			RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA	BAS	BASIC FEE		OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			42 minus 20=		• 22		×	X\$ 9=		OR	X\$18≖	
INDEPENDENT CLAIMS			4 minus 3 = 1		*		\ \ \ \ \ \	X42=		OR	X84=	
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT				+140=				+280=	
* If	the difference	in column 1 is	less than zero, enter "0" in colu			olumn 2		TOTAL		OR		
								JIAL		OR	· ·	*** *********************************
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SI	SMALL ENTITY		OR	OTHER SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	IEST IBER	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 48	Minus	** 6	12	= 6	×	\$ 9=		OR	X\$18=	180
	Independent	* /	Minus	###	4	=		42=		OR	X84=	7_47-
∢	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							140			+280=	
							<u> </u>	140= TOTAL		OR	TOTAL	10/8
										OR	ADDIT. FEE	180
	, ,	(Column 1) CLAIMS	1.	(Colui	mn 2) HEST	(Column 3)	1 —			1		
AMENOMENT B		REMAINING AFTER AMENDMENT			IBER OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	×	\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	F OL AISA	<u> </u>	×	42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+1	40=		OR	+280=	
								TOTAL T. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	th-sh		=	X:	\$ 9≖		OR	X\$18=	
	Independent	±	Minus	***		=-	×	42=		OR	X84=	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
** If the entry in column 1 is less than the entry in column 2, write 0 in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Num	mber Previously Pai	d For" (Total o	Independ	lent) is the	highest number	er found in	the app	propriate box	in co	lumn 1.	